



SPECIAL PERMIT GRANTING AUTHORITY
TOWN OF EAST LONGMEADOW, MASSACHUSETTS
APPLICATION FOR SPECIAL PERMIT FOR HOME BASED TRADE
(1 original & 6 copies to be submitted to the Board)

Revised as of JUNE 2, 2008

OWNER'S NAME: _____ PHONE: _____

CELL: _____ FAX: _____

E-MAIL ADDRESS: _____

ADDRESS: _____

NAME OF BUSINESS: _____

ZONING DISTRICT: _____

LOT SIZE: _____

MAIN STRUCTURE SIZE: _____

ACCESSORY STRUCTURE(S) SIZE: _____

PERCENTAGE OF LOT COVERAGE INCLUDING PARKING OF VEHICLES, STORAGE
AND STRUCTURES _____

PROPOSED USE – Description of business, number of vehicles, types of vehicles, sizes
of vehicles to be situated on the affected premises: (use a separate sheet if necessary).

A. Street Address: _____

Nearest intersection street: _____

Parcel Identification: _____

B. Description of uses of abutting property

The applicant shall submit with this application seven (7) copies of a certified Plan of Development and/or Plan(s) of the property covered by this application showing the following:

1. North Point
2. Property covered by the application.
3. Property of all abutters, including those directly opposite on any public, private street or way and owners of land within 300 feet of property line. Names of owners and use of property shall be shown.
4. Date of plan
5. Scale of plan
6. Plan shall designate lot size, all existing buildings and structures, vehicle/parking footprint, driveways, other paved areas, vehicle parking footprint, wheeled accessories, storage area, vehicle access and egress from the rear property, placement of required screening including walls, fences, shrubbery, lawn areas, existing and proposed and other features and requirements to comply with the Zoning By-law for the particular use. Further, documentation showing the %of business use versus residential use for taxation purposes.
7. For new construction, or alterations which alter the exterior appearance of the buildings, a plan shall be provided which will adequately illustrate the appearance of new or altered buildings.
8. Certification of the plan shall be by an architect, professional engineer or land surveyor as applicable.
9. Proof of ownership of residency by real estate tax bill or deed and business existence at same location as of January 28, 2008.

10. Proof of ownership and descriptions of all year, make, model, types, plate numbers and sizes of vehicles intended to be parked at the site.

11. A full list of all outside materials or equipment, including hazardous materials intended to be stored at the premises.

12. A minimum of four photographs showing the rear of the site including the proposed parking area and at least two photographs from the street angle, showing the relationship of the parcel with the street.

C. The following plans and documents are submitted in support of this application:

COPIES	DRAWING NO.	DESCRIPTION

D. General:

1. Has any previous application for Special Permit for this use been filed with the Special Permit Granting Authority by this applicant in connection with these premises?

2. If so, when? _____

3. If so, what action was made on the application by the Authority?

E. Deed or Certificate of Title, dated _____ Recorded at Hampden
County Registry of Deeds at Book _____ ; Page _____

Record Owner of Property _____

Signature of Owner: _____ Date _____

- F. A check or cash in the amount of \$250.00 payable to the Town of East Longmeadow must accompany this application.

NOTE: Advertising costs will be billed directly to the applicant by the newspaper.

I do hereby depose and say that all of the above statements as well as the statements contained in all papers filed herewith are true.

By: _____
Owner

MASSACHUSETTS JURAT

Commonwealth of Massachusetts
County of Hampden

On this the _____ day of _____, before me,

_____, the undersigned

Notary Public, personally appeared _____, and proved to me through satisfactory evidence of identity, which was personal knowledge, to be the persons whose names were signed on the preceding or attached document in my presence, and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of his/her/their knowledge and belief.

Signature of Notary Public

Printed Name of Notary Public

My Commission Expires _____

(seal)